

PATENT Attorney Docket No. 300568 Express Mail Label No. EL971196937US

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Richard FEARS et al.

Application No.: 10/789,680

Filed: February 27, 2004

For: SYSTEMS AND METHODS FOR UPLOADING AND DISTRIBUTING

MEDICAL DATA SETS

Examiner: Not yet known

Art Unit: 3736

Confirmation No.: 7544

Commissioner for Patents P. O. Box 1450 Alexandria, VA 22313-1450 I CERTIFY THAT THAT THIS CORRESPONDENCE IS BEING FACSIMILE TRANSMITTED TO THE USPT OO B DEPOSTED WITH THE US. POSTAL SERVICE WITH SUFFICIENT POSTAGE AS FIRST CLASS MAIL IN AN ENVELOPE ADDRESSED TO: COMMISSIONEE FOR PATENTS, PO. BOX 1450, ALEXANDRIA, VA 22313-1450 ON THE DATE SHOWN BELOW.

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INFORMATION DISCLOSURE STATEMENT Under 37 C.F.R. 1.97(b)(3) and 1.98

Sir:

The Information Disclosure Statement submitted herewith is being filed before the mailing date of a first Office action on the merits.

The Examiner is requested to consider the references noted on the enclosed Form PTO/SB/08a during examination of the above-identified patent application. These references are submitted for the Examiner's consideration and are submitted pursuant to the duty of disclosure under 37 C.F.R. § 1.56. In submitting these references, no representation is made or implied that the references are or are not material to the examination of the application.

The Examiner is encouraged to make his or her own determination of materiality. In accordance with 37 C.F.R. § 1.98(a)(2)(i), copies of the U.S. references are not provided herewith.

Receipt date: 07/19/2004

Application No. 10/789,680 Attorney Docket No. 300568

Pursuant to 37 C.F.R. § 1.97(b)(3), no fees are due with respect to this filing.

However, should any fees be deemed necessary, such fees may be charged to Deposit

Account No. 06-0029.

If the Examiner has any questions concerning the relevance of any reference cited in this disclosure, please contact the undersigned attorney.

Dated: 7/19/2004

Respectfully submitted,

Chad S. Hilyard Registration No. 40,647 Attorney for Applicant

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PTO/SB/08a (05-03)

Approved for use through 04/30/2003. 0Mb 0851-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Substitute for form 1444 PP RADDICTORY
INFORMATION DISCLOSURE
STATEMENT BY APPLICANT
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recursed to respond to a calection of information unless factains a valid OAB content number.

Complete if Known

Application Number 10/789,680

Filing Date February 27, 2004

First Named Inventor Richard FEARS et al.

Art Unit 3736

Examiner Name Not yet Known

Not yet Known

300568

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				Art Unit	3736	
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Examiner Signature	/Valerie Lubin/	Date Considered	01/08/2009

EXAMINER: Initial I reference considered, whether or not citation is in conformance with MPEP 600. Draw time through citation in conformance and not considered, include copy of this form with next communication to applicant. Applicant's unique citation designation number (polinosi). 2 See Kinds Codes of USPTO Patent Documents at www.uspip.gov or MPEP 90104.3 Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). 4 For Jeanness patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. 3 Kind of document is 5 kind of document in Sind of the document. Sind of security is appropriate symbol as a bridgisted on the document under WIPO Standard ST. 16 if possible. 6 Applicant is to

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This collection of Information is required by 37 CER 137 and 198. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CER 1.14. This collection is estimated to lake 2 hours to complete, including gathering, preparing, and submitting the completed application from the USPTO. There will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patientien of Commence, D., O. Box 1450, Aserdiad, V.A. 22313-1450. O NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Aserdiad, V.A. 22313-1450.